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ĺ	UTILITY	Attorney Docket No. MI22-1742

PATENT APPLICATION

TRANSMITTAL (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

to respo		and Trademark Offi	PTO/SB/05 (4/98) use through 09/30/2000. OMB 0651-0032 ice: U.S. DEPARTMENT OF COMMERCE ss it displays a valid OMB control number.
Attorr	ney Docket No.	MI22-1742	
First	Inventor or App	olication Identifier	Kristy A. Campbell
Title	Method of F	Forming Non-V	Volatile Resistance Variable
Expre	ess Mail Label	No. EL 465783	2320

_	APPLICATION ELEMENTS apter 600 concerning utility patent application contents.		Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC, 20221			
1. X * F (S	Tee Transmittal Form (e.g., PTO/SB/17) Tubmit an original and a duplicate for fee processing) Descriptive title of the Invention Plus title Cross References to Related Applications Statement Regarding Fed sponsored R & D Reference to Microfiche Appendix Background of the Invention Brief Summary of the Invention Brief Description of the Drawings (if filed) Detailed Description Claim(s) Abstract of the Disclosure rawing(s) (35 U.S.C. 113) [Total Sheets 3 Declaration [Total Pages 2 X Newly executed (original or copy) Copy from a prior application (37 C.F.R. § 1 (for continuation/divisional with Box 16 completed) i. DELETION OF INVENTOR(s) Signed statement attached deleting inventor(s) named in the prior applica see 37 C.F.R. §§ 1.63(d)(2) and 1.33 ITEMS 1 & 13 IN ORDER TO BE ENTITLED TO PAY SMALL EN INCLEDITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCENTIAL ENTITY STATEMENT IS REQUIRED (37 C.F.R] ition, (b). ition, (g). ition, (g). ition, (g). ition, (g). ition, (g). ition, (g).	Mashington. DC 20231 5. Microfiche Computer Program (Appendix) 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Copy b. Paper Copy (identical to computer copy) c. Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 7. X Assignment Papers (cover sheet & document(s)) 8. 37 C.F.R.§3.73(b) Statement Power of (when there is an assignee) Attorney 9. English Translation Document (if applicable) 10. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 11. Preliminary Amendment 12. X (Should be specifically itemized) * Small Entity Statement(s) Statement filed in prior application Status still proper and desired (PTO/SB/09-12) 14. (Groign priority is claimed) 15. X Other: Check: Power of Attorney by Assignee and Certificate by Assignee			
			ng continuation or divisional application and is hereby incorporated by as been inadvertently omitted from the submitted application parts.			
	17. CORRESPO	NDEN	NCE ADDRESS			
X Custon	☐ Customer Number or Bar Code Labe ! 021567 or ☐ Correspondence address below (Insert Customer No. or Attach bar code label here)					
Name	Mark S. Matkin					
	Wells, St. John, Roberts, Gregory & Matk 601 West First Avenue, Suite 1300	in P.S	S			
Address						
City	Spokane State	W	WA Zip Code 99201-3828			
Country	Telephone	50	509-624-4276 Fax 509-838-3424			
Name (Print/Type) Mark S_Matkin		Registration No. (Attorney/Agent) 32,268			
Signatur			Date 8-29-01			
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FEE TRANSMIT Complete if Known Unknown Application Number for FY 2001 Filing Date Filed Herewith Kristy A. Campbell Patent fees are subject to annual revision First Named Inventor Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12 Unknown Examiner Name See 37 CFR §§ 127 and 128 Unknown Group / Art Unit TOTAL AMOUNT OF PAYMENT (\$)1,064.00 MI22-1742 Attorney Docket No.

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)				
1. X The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES				
— indicated lees and credit any overpayments to	Large Entity Small Entity Fee				
Deposit Account 23,0025	Code (\$) Code (\$)	Fee Paid			
Account Number 23-0925	105 130 205 65 Surcharge - late filing fee or oath	0.00			
Deposit Account Name Wells, St. John, Roberts et al.	127 50 227 25 Surcharge - late provisional filing fee or cover sheet	0.00			
Name Wells, St. John, Roberts et al.	139 130 139 130 Non-English specification	0.00			
Charge Any Additional Fee Required Under 37 CFR §§ 1 16 and 1 17	147 2,520 147 2,520 For filing a request for reexamination	0.00			
2. 🔀 Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to Examiner action	0.00			
X Check Money Other	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action	0.00			
FEE CALCULATION	115 110 215 55 Extension for reply within first month	0.00			
	116 380 216 190 Extension for reply within second month	0.00			
1. BASIC FILING FEE Large Entity Small Entity	117 870 217 435 Extension for reply within third month	0.00			
Fee Fee Fee Fee Description	118 1,360 218 680 Extension for reply within fourth month	0.00			
Code (\$) Code (\$) Fee Paid	128 1,850 228 925 Extension for reply within fifth month	0.00			
101 690 201 345 Utility filing fee 710.00	119 300 219 150 Notice of Appeal	0.00			
106 310 206 155 Design filing fee	120 300 220 150 Filing a brief in support of an appeal	0.00			
	121 260 221 130 Request for oral hearing	0.00			
108 690 208 345 Reissue filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding	0.00			
114 150 214 75 Provisional filing fee	140 110 240 55 Petition to revive - unavoidable	0.00			
SUBTOTAL (1) (\$) 710.00	141 1,210 241 605 Petition to revive - unintentional	0.00			
2. EXTRA CLAIM FEES	142 1,210 242 605 Utility issue fee (or reissue)	0 00			
Fee from Ext <u>ra Claims below</u> Fee Paid	143 430 243 215 Design issue fee	0.00			
Total Claims 33 20** - 13 X 18 = 234	144 580 244 290 Plant issue fee	0.00			
Independent 4 - 3** = 1 × 80 = 80	122 130 122 130 Petitions to the Commissioner	0.00			
Multiple Dependent = 0	123 50 123 50 Petitions related to provisional applications	0.00			
**or number previously paid, if greater, For Reissues, see below	126 240 126 240 Submission of Information Disclosure Stmt				
Large Entity Small Entity Fee Fee Fee Fee Fee Description	581 40 581 40 Recording each patent assignment per	0.00			
Code (\$) Code (\$)	property (times number of properties)	40.00			
103 18 203 9 Claims in excess of 20 102 78 202 39 Independent claims in excess of 3	146 690 246 345 Filing a submission after final rejection (37 CFR § 1 129(a))	0.00			
104 260 204 130 Multiple dependent claim, if not paid	149 690 249 345 For each additional invention to be examined (37 CFR § 1 129(b))				
109 78 209 39 ** Reissue independent claims	l ' ' ' ' '	0.00			
over original patent	Other fee (specify)	0.00			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)	0.00			
SUBTOTAL (2) (\$) 314.00	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.	00			
SUBMITTED BY Complete (ff applicable)					
Registration No.					
Wiaik S. Walkin	(Attorney/Agent) 32,268 Telephone 509-624-4	1 276			

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Signature

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Date